



COPY OF PAPERS  
ORIGINALLY FILED

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Reiss et al.

Group No.: Unknown

Serial No.: 10/044,843

Examiner: Unknown

Filed: 11 January 2002

For: Devices and Methods Using an Expandable Body with Internal Restraint for Compressing Cancellous Bone

Commissioner of Patents  
Washington, D.C. 20231

**STATEMENT BY ATTORNEY THAT APPLICATION FILED IN PTO IS THE  
ONE INVENTOR(S) EXECUTED BY SIGNING DECLARATION**

I, Daniel D. Ryan, Registration No. 29,243, of RYAN KROMHOLZ & MANION, S.C.,  
P.O. Box 26618, Milwaukee, Wisconsin 53226-0618, {(262) 783-1300} state I am an attorney for this  
application and the application identified above is the application which the inventor(s) executed by  
signing the declaration which is being submitted herewith.

**CERTIFICATE OF MAILING (37 CFR 1.8a)**

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Date 10 September 2002

By Judith Dunaway  
Judith Dunaway  
(Typed Name of Person Signing Paper)



COMBINED DECLARATION AND POWER OF ATTORNEY  
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,  
CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

**TYPE OF DECLARATION**

This declaration is of the following type: (*check one applicable item below*)

- original
- design
- supplemental

**NOTE:** *If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application do not check next item; check appropriate one of last three items.*

- national stage of PCT

**NOTE:** *If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR CIP.*

- divisional
- continuation
- continuation-in-part (CIP)

**INVENTORSHIP IDENTIFICATION**

**WARNING:** *If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.*

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**TITLE OF INVENTION**

**DEVICES AND METHODS USING AN EXPANDABLE BODY WITH INTERNAL RESTRAINT FOR  
COMPRESSING CANCELLOUS BONE**

**SPECIFICATION IDENTIFICATION**

the specification of which: (*complete (a), (b) or (c)*)

- (a)       is attached hereto.
- (b)       was filed on 11 January 2002 as  Serial No. 10/044,843  
or  Express Mail No., as Serial No. not yet known \_\_\_\_\_  
and was amended on \_\_\_\_\_ (if applicable).

**NOTE:** *Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.*

- (c)       was described and claimed in PCT International Application No. \_\_\_\_\_  
filed on \_\_\_\_\_ and as amended under PCT Article 19 on \_\_\_\_\_ (if any).



## ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56

(also check the following item, if desired)

[ ] In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.

### PRIORITY CLAIM (35 U.S.C. § 119)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

(d) [X] no such applications have been filed.  
(e) [ ] such applications have been filed as follows.

**NOTE:** Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

**A. PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN  
12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS  
APPLICATION AND ANY PRIORITY CLAIMS UNDER  
35 U.S.C. S 119**

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUM- BER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
			[ ] YES NO [ ]
			[ ] YES NO [ ]
			[ ] YES NO [ ]
			[ ] YES NO [ ]
			[ ] YES NO [ ]



ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS  
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

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NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CIP APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. S 120.

**POWER OF ATTORNEY**

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (*List name and registration number*)

**Daniel D. Ryan (29,243)**  
**John M. Manion (38,957)**  
**Daniel R. Johnson (46,204)**  
**Laura A. Dable (46,436)**

**Joseph A. Kromholz (34,204)**  
**Patricia Jones (46,318)**  
**Arnold J. Ericson (16,879)**  
**Patricia A. Limbach (50,295)**

(check the following item, if applicable)

[ ] Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

---

**SEND CORRESPONDENCE TO**

**DIRECT TELEPHONE CALLS TO:**

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---

**DECLARATION**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

OIE SC18  
SEP 16 2002  
PATENT & TRADEMARK OFFICE  
**SIGNATURE(S)**

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

Full name of sole or first inventor

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(MIDDLE INITIAL OR NAME)

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Inventor's signature

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Full name of second joint inventor, if any

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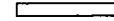
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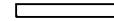
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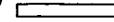
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CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH  
FORM A PART OF THIS DECLARATION

[ ] Signature for sixth and subsequent joint inventors. Number of pages added \_\_\_\_\_

\* \* \*

[ ] Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added \_\_\_\_\_

\* \* \*

[ ] Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added \_\_\_\_\_

\* \* \*

[ X ] Added pages to combined declaration and power of attorney for US Priority Claim

[ X ] Number of pages added 2

\* \* \*

[ ] Authorization of attorney(s) to accept and follow instructions from representative

\* \* \*

*(If no further pages form a part of this declaration then end this declaration with this page and check the following item:)*

[ ] This declaration ends with this page